APPLICATION FOR PERMIT TO OPERATE A RESOURCE RECOVERY AND MANAGEMENT FACILITY LIMITED TO PROCESSING (RECYCLING) OF WASTE

Applicant Name & Title:				
Applicant Address:				
Zip Code:	Telephone Number:			
Proposed Disposal Location:_ (Attach aerial and site	plan depicting location of operation)			
Approx. size:				
acres	Section	Township	Range	
Folio #	Legal Description:			
	ripated amount per day: from above):			
Address:				
Approximate land elevation (fe Existing:				
Effective Access Control to Pro	event Unauthorized Disposal (fence v	v/ gate, perimeter berm w	/ chain, etc.):	
Explain:				
	rom outside sources? (YES or NO):_sources that bring material to your fac	cility)		

Submit facility plan detailing storage of incoming waste (stormwater management if applicable) and recycled product, retention time of material on-site and treatment methods. Additionally, a plan describing testing methodology must be submitted.

^{*}This facility shall only accept non-hazardous material for recycling.

^{**}Submit fee payable to "Miami-Dade County" with application as indicated by the enclosed fee schedule.

Methodology for monitoring incoming waste:
A) Authorized Representative of Applicant present:
B) Other proposed method (describe):
End use of product:
Incoming waste shall be dumped apart from immediate working area and inspected for non-acceptable items Non-acceptable materials shall be removed from site on a routine basis.
Off-site Disposal Location for Non-acceptable materials (list specific location):
Recycled material and incoming waste shall not be stored or disposed of in contact with groundwaters or surface waters.
Amount of other types of <u>any</u> solid waste (garbage, trash, vegetation, asbestos, tires, etc.) inadvertently place on site, with or without authorization, shall be considered non-acceptable materials, segregated from construction and demolition material, and disposed at off-site location indicated above.
Other permits may be required in addition to this permit.
The undersigned owner** or authorized representative of
is fully aware that the statements made in this application for an operation permit are true, correct, and complete to the best of his/her knowledge and belief. Further, the undersigned agrees to maintain and operate the potential pollution source and pollution control facilities in such a manner as to comply with the aforementioned criteria the provisions of Chapter 24, Miami-Dade County Code, and all applicable rules and regulations. He/She also understands that a permit, if granted by the Department, will be non-transferable and he/she will promptly notify the Department upon sale, change of location, or legal transfer of the permitted facility. He/She further understands that failure to comply with the above criteria, rules and regulations may result in suspension or revocation of permit and site restoration.
Signature, Owner or Authorized Representative (Notarization is mandatory)
Typed Name and Title Date